

## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: MailMail Stop ISSUE FEE  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, Virginia 22313-1450  
or Fax (703) 746-4000

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where applicable. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)

000959 7590 09/13/2004

LAHIVE & COCKFIELD, LLP.  
28 STATE STREET  
BOSTON, MA 02109

12/14/2004 WASFAW2 00000027 120080 09777317

01 FC:1504 300.00 DA  
02 FC:8001 30.00 DA  
03 FC:1501 1400.00 DA

Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

## Certificate of Mailing or Transmission

I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (703) 746-4000, on the date indicated below.

(Depositor's name)
(Signature)
(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/777,317	02/05/2001	Hermann Bujard	TTV-013C3CN3	3698

TITLE OF INVENTION: TETRACYCLINE-REGULATED TRANSCRIPTIONAL ACTIVATOR FUSION PROTEINS

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1330	\$300	\$1630	12/13/2004

EXAMINER	ART UNIT	CLASS-SUBCLASS
SHUKLA, RAM R	1632	530-350000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
- ☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
- (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

Lahive & Cockfield LLP  
DeAnn F. Smith  
3

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

TET Systems Holding GmbH &amp; Co. KG

Heidelberg, Germany

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are enclosed:

- ☒ Issue Fee
- ☒ Publication Fee (No small entity discount permitted)
- ☒ Advance Order - # of Copies 10

4b. Payment of Fee(s):

- ☐ A check in the amount of the fee(s) is enclosed.
- ☐ Payment by credit card. Form PTO-2038 is attached.
- ☒ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 12-0080 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.
- ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above. NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature

Date

Typed or printed name DeAnn F. Smith, Esq.

Registration No. 36,683

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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PTO/SB/21 (09-04)

Approved for use through 07/31/2006. OMB 0651-0031

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

<b>TRANSMITTAL FORM</b>  (to be used for all correspondence after initial filing)	Application Number	09/777317-Conf. #3698
	Filing Date	February 5, 2001
	First Named Inventor	Hermann BUJARD
	Art Unit	1632
	Examiner Name	Ram R. Shukla
Total Number of Pages in This Submission	Attorney Docket Number	TTV-013C3CN3

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): - Part B Issue Fee Transmittal (PTOL-85) - Certificate of Express Mailing - Return Receipt Postcard
<div>Remarks</div>		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	LAHIVE & COCKFIELD, LLP		
Signature			
Printed name	DeAnn F. Smith		
Date	December 8, 2004	Reg. No.	36,683

I hereby certify that this correspondence is being deposited with the U.S. Postal Service as Express Mail, Airbill No. EV418603705US, in an envelope addressed to: MS Issue Fee, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below.

Dated: December 8, 2004

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# FEE TRANSMITTAL for FY 2005

Effective 10/01/2004. Patent fees are subject to annual revision.

☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$ ) 1,700.00

## Complete if Known

Application Number	09/777317-Conf. #3698
Filing Date	February 5, 2001
First Named Inventor	Hermann BUJARD
Examiner Name	Ram R. Shukla
Art Unit	1632
Attorney Docket No.	TTV-013C3CN3

## METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit Card ☐ Money Order  
☒ Deposit Account ☐ None

Deposit  
Account  
Number

12-0080

Deposit  
Account  
Name

Lahive & Cockfield, LLP

The Director is authorized to: (check all that apply)

☒ Charge fee(s) indicated below  
☐ Charge fee(s) indicated below, except for the filing fee  
☒ Charge any additional fee(s) or any underpayment of fee(s)  
under 37 CFR 1.16 and 1.17  
☒ Credit any overpayments

To the above-identified deposit account.

☐ Other (please identify):

## FEE CALCULATION

### 1. BASIC FILING FEE

Fee Description	Fee (\$)	Small Entity Fee (\$)	Fee Paid (\$)
Utility Filing Fee	790	395	
Design Filing Fee	350	175	
Plant Filing Fee	550	275	
Reissue Filing Fee	790	395	
Provisional Filing Fee	160	80	
Subtotal (1) \$		0.00	

## FEE CALCULATION (continued)

### 2. EXTRA CLAIM FEES

Fee Description	Fee (\$)	Small Entity Fee (\$)
Each claim over 20	18	9
Each independent claim over 3	88	44
Multiple dependent claims	300	150
For Reissues, each claim over 20 and more than in the original patent	18	9
For Reissues, each independent claim more than in the original patent	88	44

Total Claims Extra Claims Fee (\$) Fee Paid (\$)

- 20 or HP = x =

HP= highest number of total claims paid for, if greater than 20

Indep. Claims Extra Claims Fee (\$) Fee Paid (\$)

- 3 or HP = x =

HP= highest number of independent claims paid for, if greater than 3

Multiple Dependent Claims Fee (\$) Fee Paid (\$)

Subtotal (2) \$ 0.00

### 3. OTHER FEES

Fee Description	Fee (\$)	Small Entity Fee (\$)	Fee Paid
1-month extension of time	110	55	
2-month extension of time	430	215	
3-month extension of time	980	490	
4-month extension of time	1,530	765	
5-month extension of time	2,080	1,040	
Information disclosure stmt. Fee	180	180	
37 CFR 1.17(q) processing fee	50	50	
Non-English specification	130	130	
Notice of Appeal	340	170	
Filing a brief in support of appeal	340	170	
Request for oral hearing	300	150	
1504; 8001; 1501 Publication fee for early, voluntary, Other: or normal publication; Printed copy of patent w/o color; Utility issue fee			1,700.00

Subtotal (3) \$ 1,700.00

## SUBMITTED BY

Signature

*DeAnn F. Smith*

Registration No.  
(Attorney/Agent)

36,683

Telephone

(617) 227-7400

Name (Print/Type)

DeAnn F. Smith

Date

December 8, 2004

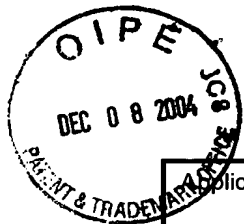
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Dated: December 8, 2004

Signature:

*DeAnn F. Smith*

(DeAnn F. Smith)



Application No. (if known): 09/777317

Attorney Docket No.: TTV-013C3CN3

## Certificate of Express Mailing Under 37 CFR 1.10

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on December 8, 2004  
Date

Signature

DeAnn F. Smith

Typed or printed name of person signing Certificate

36,683

Registration Number, if applicable

(617) 227-7400

Telephone Number

Note: Each paper must have its own certificate of mailing, or this certificate must identify each submitted paper.

Transmittal (1 page)  
Fee Transmittal (1 page) in duplicate  
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